

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>DR</i>	<i>32</i>	<i>2/21</i>
FORMALITY REVIEW	<i>WM</i>	<i>869</i>	<i>03-03-01</i>
RESPONSE FORMALITY REVIEW	<i>BBG</i>	<i>1091</i>	<i>6-26-01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Date
Final	Original
1	2-23-01
2	
3	✓
4	✓
5	✓
6	✓
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8	✓
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19	✓
20	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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